

# Major Donor and Independent Expenditure Committee Campaign Statement

(Government Code Sections 84200-84216.5)

MAJOR DONOR AND INDEPENDENT EXPENDITURE  
COMMITTEE STATEMENT

Type or print in ink.

☐ Amendment

SEE INSTRUCTIONS ON REVERSE

<b>Statement covers period</b> from <u>07/01/2017</u> through <u>12/31/2017</u>	<b>Date of election if applicable:</b> (Month, Day, Year) _____	Date Stamp	<b>CALIFORNIA FORM 461</b>
			1/3
			For Official Use Only

## 1. Name and Address Of Filer

### NAME OF FILER

(Include name(s) of all affiliated entities whose contributions are included in this statement.)  
CARRILLO, FRANK S.

MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

CHULA VISTA CA 91915

### RESPONSIBLE OFFICER

(If filer is other than an individual)

Frank Carrillo

### AREA CODE/DAYTIME PHONE

## 2. Nature and Interests of Filer (Complete each applicable section.)

☒ A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS

BUSINESS INTERESTS

Unicare Systems, Inc.

Business Services

ADDRESS OF EMPLOYER/BUSINESS

Chula Vista CA 91915

☐ A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

☐ A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

☐ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

## 3. Summary

(Amounts may be rounded to whole dollars.)

- Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) ..... \$ 8650.00
- Unitemized expenditures and contributions (including loans) under \$100 made this period..... \$ 0.00
- Total expenditures and contributions made this period. (Add Lines 1 + 2.) ..... **SUBTOTAL** \$ 8650.00
- Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) ..... \$ 0.00
- Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.)..... **TOTAL** \$ 8650.00

## 4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2018  
DATE

By Frank Carrillo  
SIGNATURE OF INDIVIDUAL DONOR OR  
RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

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INDEPENDENT EXPENDITURE COMMITTEE AND  
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period from <u>07/01/2017</u>	<b>CALIFORNIA FORM 461</b>
through <u>12/31/2017</u>	
2/3	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CARRILLO,FRANK S.

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
07/20/2017	Antonio Villaraigosa  Los Angeles CA 90067 ID: Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Antonio Villaraigosa Governor Statewide  NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	2500.00	Calendar Year \$ <u>2500.00</u> Other \$ <u>0.00</u>
07/07/2017	Gilbert Otero  El Centro CA 92243 ID: Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Gilbert Otero Other -- District Attorney County -- Imperial Imperial NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	3000.00	Calendar Year \$ <u>3000.00</u> Other \$ <u>0.00</u>
10/25/2017	Ben Hueso  Chula Vista CA 91910 ID: Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Ben Hueso State Senator Statewide  NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1000.00	Calendar Year \$ <u>1000.00</u> Other \$ <u>0.00</u>
12/08/2017	Vivian Moreno  Sacramento CA 95815 ID: Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Vivian Moreno Other -- City Council City -- San Diego San Diego NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	550.00	Calendar Year \$ <u>550.00</u> Other \$ <u>0.00</u>
<b>SUBTOTAL \$</b>						

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NAME OF FILER

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DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
12/28/2017	Nathan Fletcher  San Diego CA 92165 ID: Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Nathan Fletcher Other -- County Supervisor County -- San Diego San Diego NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	1600.00	Calendar Year \$ <u>1600.00</u> Other \$ <u>0.00</u>

SUBTOTAL \$ 8650.00

FPPC Form 461 (8/99)  
For Technical Assistance: 916/322-5660